

UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION

CASE NO.: 6:16-bk-06371-KSJ

IN RE:

NORRIS MATTHEWS,

Debtor(s).

\_\_\_\_\_ /


NOTICE OF FILING

COMES NOW, the Debtor, Norris Matthews, and would file the attached Amended Schedule I, Amended Schedule J, Amended Summary of Your Assets and Liabilities and Certain Statistical Information, Statement of Intention for Individuals Filing Under Chapter 7, and Chapter 7 Statement of Your Current Monthly Income.

DECLARATION OF DEBTOR

I hereby declare under penalty of perjury that the information contained in the attached Amended Schedule I, Amended Schedule J, Amended Summary of Your Assets and Liabilities and Certain Statistical Information, Statement of Intention for Individuals Filing Under Chapter 7, and Chapter 7 Statement of Your Current Monthly Income are true and correct to the best of my information and belief.

Date: 12/02/2016

  
Norris Matthews

## Fill in this information to identify your case:

Debtor 1	<u>Norris</u>		<u>Matthews</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>MIDDLE DISTRICT OF FLORIDA</u>		
Case number (if known)	<u>6:16-bk-06371-KSJ</u>		

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM/DD/YYYY

## Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Employment

## 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

## Employment status

## Debtor 1

- ☒ Employed  
☐ Not employed

## Occupation

Public Works

## Employer's name

City of Lake Mary

## Employer's address

Number Street

City

State Zip Code

How long employed there? 16 years

## Debtor 2 or non-filing spouse

- ☐ Employed  
☐ Not employed

Number Street

City

State Zip Code

## Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

## For Debtor 1

## For Debtor 2 or non-filing spouse

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$4,259.23

3. Estimate and list monthly overtime pay.

3. + \$0.00

4. Calculate gross income. Add line 2 + line 3.

4. \$4,259.23

Debtor 1 **Norris**

First Name

**Matthews**

Last Name

Case number (if known) **6:16-bk-06371-KSJ**

Middle Name

For Debtor 1

For Debtor 2 or  
non-filing spouse

Copy line 4 here ..... → 4.

**\$4,259.23****5. List all payroll deductions:**

5a. Tax, Medicare, and Social Security deductions

5a. **\$778.59**

5b. Mandatory contributions for retirement plans

5b. **\$31.90**

5c. Voluntary contributions for retirement plans

5c. **\$0.00**

5d. Required repayments of retirement fund loans

5d. **\$0.00**

5e. Insurance

5e. **\$124.46**

5f. Domestic support obligations

5f. **\$0.00**

5g. Union dues

5g. **\$0.00**

5h. Other deductions.

5h. **\$0.00**

Specify: \_\_\_\_\_

5h. +

6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.

6. **\$934.95**

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7. **\$3,324.28****8. List all other income regularly received:**

8a. Net income from rental property and from operating a business, profession, or farm

8a. **\$0.00**

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8b. Interest and dividends

8b. **\$0.00**

8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive

8c. **\$0.00**

Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8d. Unemployment compensation

8d. **\$0.00**

8e. Social Security

8e. **\$0.00**

8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

Specify: \_\_\_\_\_

8f. **\$0.00**

8g. Pension or retirement income

8g. **\$0.00**

8h. Other monthly income.

Specify: \_\_\_\_\_

8h. + **\$0.00**

9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.

9. **\$0.00**

10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10. **\$3,324.28**

+

**\$3,324.28**

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: \_\_\_\_\_

11. + **\$0.00**

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.

12. **\$3,324.28**Combined  
monthly income

13. Do you expect an increase or decrease within the year after you file this form?

☒ No.

None.

☐ Yes. Explain:

Debtor 1 Norris Matthews Case number (if known) 6:16-bk-06371-KSJ  
 First Name Middle Name Last Name

1. Additional Employers Debtor 1

Debtor 2 or non-filing spouse

Occupation	<u>Public Works</u>	
Employer's name	<u>City of Deltona</u>	
Employer's address		
City	State	Zip Code

How long employed there? \_\_\_\_\_

\_\_\_\_\_

**Fill in this information to identify your case:**

Debtor 1	<u>Norris</u>		<u>Matthews</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>MIDDLE DISTRICT OF FLORIDA</u>		
Case number (if known)	<u>6:16-bk-06371-KSJ</u>		

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

**Official Form 106J****12/15****Schedule J: Your Expenses**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

**2. Do you have dependents?**☒ No☐ Yes. Fill out this information for each dependent.....

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

**4. The rental or home ownership expenses for your residence.**  
Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

Your expenses4. \$1,024.00

4a. \_\_\_\_\_

4b. \_\_\_\_\_

4c. \_\_\_\_\_

4d. \_\_\_\_\_

Debtor 1 **Norris**  
First Name

Middle Name

**Matthews**  
Last NameCase number (if known) **6:16-bk-06371-KSJ**Your expenses

5. Additional mortgage payments for your residence, such as home equity loans 5. \_\_\_\_\_
6. Utilities:
- 6a. Electricity, heat, natural gas 6a. \$175.00
- 6b. Water, sewer, garbage collection 6b. \$20.00
- 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$243.00
- 6d. Other. Specify: \_\_\_\_\_ 6d. \_\_\_\_\_
7. Food and housekeeping supplies 7. \$250.00
8. Childcare and children's education costs 8. \_\_\_\_\_
9. Clothing, laundry, and dry cleaning 9. \$50.00
10. Personal care products and services 10. \$80.00
11. Medical and dental expenses 11. \$50.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$40.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$100.00
14. Charitable contributions and religious donations 14. \_\_\_\_\_
15. Insurance.  
Do not include insurance deducted from your pay or included in lines 4 or 20.
- 15a. Life insurance 15a. \_\_\_\_\_
- 15b. Health insurance 15b. \_\_\_\_\_
- 15c. Vehicle insurance 15c. \$175.00
- 15d. Other insurance. Specify: \_\_\_\_\_ 15d. \_\_\_\_\_
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  
Specify: \_\_\_\_\_ 16. \_\_\_\_\_
17. Installment or lease payments:
- 17a. Car payments for Vehicle 1 **FCCU** 17a. \$1,209.00
- 17b. Car payments for Vehicle 2 **Santander** 17b. \$136.00
- 17c. Other. Specify: \_\_\_\_\_ 17c. \_\_\_\_\_
- 17d. Other. Specify: \_\_\_\_\_ 17d. \_\_\_\_\_
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \_\_\_\_\_
19. Other payments you make to support others who do not live with you.  
Specify: \_\_\_\_\_ 19. \_\_\_\_\_

Debtor 1 **Norris** **Matthews**  
 First Name Middle Name Last Name

Case number (if known) **6:16-bk-06371-KSJ**

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property 20a. \_\_\_\_\_  
 20b. Real estate taxes 20b. \_\_\_\_\_  
 20c. Property, homeowner's, or renter's insurance 20c. \_\_\_\_\_  
 20d. Maintenance, repair, and upkeep expenses 20d. \_\_\_\_\_  
 20e. Homeowner's association or condominium dues 20e. \_\_\_\_\_

21. Other. Specify: \_\_\_\_\_ 21. + \_\_\_\_\_

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21. 22a. **\$3,552.00**  
 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. 22b. \_\_\_\_\_  
 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. **\$3,552.00**

**23. Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. **\$3,324.28**  
 23b. Copy your monthly expenses from line 22c above. 23b. - **\$3,552.00**  
 23c. Subtract your monthly expenses from your monthly income. 23c. **(\$227.72)**  
 The result is your monthly net income.

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.  
☐ Yes.

Explain here:  
**None.**

**Fill in this information to identify your case:**

Debtor 1	<b>Norris</b>		<b>Matthews</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>MIDDLE DISTRICT OF FLORIDA</b>			
Case number (if known)	<b>6:16-bk-06371-KSJ</b>		

☒ Check if this is an amended filing
**Official Form 106Sum****Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets**

Your assets  
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)
  - 1a. Copy line 55, Total real estate, from Schedule A/B..... **\$95,000.00**
  - 1b. Copy line 62, Total personal property, from Schedule A/B..... **\$110,165.00**
  - 1c. Copy line 63, Total of all property on Schedule A/B..... **\$205,165.00**

**Part 2: Summarize Your Liabilities**

Your liabilities  
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)
    - 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$134,933.00**
  3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)
    - 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$0.00**
    - 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + **\$2,874.00**
- Your total liabilities **\$137,807.00**

**Part 3: Summarize Your Income and Expenses**

4. *Schedule I: Your Income* (Official Form 106I)
 

Copy your combined monthly income from line 12 of Schedule I..... **\$3,324.28**
5. *Schedule J: Your Expenses* (Official Form 106J)
 

Copy your monthly expenses from line 22c of Schedule J..... **\$3,552.00**



Debtor 1

**Norris**

First Name

**Matthews**

Last Name

Case number (if known) **6:16-bk-06371-KSJ****Part 4: Answer These Questions for Administrative and Statistical Records****6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

**7. What kind of debt do you have?**

- ☒ Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.**\$1,717.73****9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

Total claim

From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations. (Copy line 6a.)

\$0.00

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

\$0.00

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

\$0.00

9d. Student loans. (Copy line 6f.)

\$0.00

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

\$0.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

+ \$0.00

9g. Total. Add lines 9a through 9f.

\$0.00

**Fill in this information to identify your case:**

Debtor 1	<b>Norris</b>		<b>Matthews</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>MIDDLE DISTRICT OF FLORIDA</b>			
Case number (if known)	<b>6:16-bk-06371-KSJ</b>		

☐ Check if this is an amended filing
**Official Form 108****Statement of Intention for Individuals Filing Under Chapter 7****12/15**

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Hold Secured Claims**

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <b>Compass Bank</b>	<input checked="" type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: <b>2014 Chevrolet Impala (approx. 27000 miles)</b>	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
	<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	
Creditor's name: <b>Florida Central Credit Union</b>	<input checked="" type="checkbox"/> Surrender the property.	<input checked="" type="checkbox"/> No
Description of property securing debt: <b>2015 Chevrolet Corvette (approx. 6800 miles)</b>	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
	<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	
Creditor's name: <b>Nissan Motor Acceptance</b>	<input checked="" type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: <b>2013 Nissan Rogue (approx. 60000 miles)</b>	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
	<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	

Debtor 1 **Norris** **Matthews** Case number (if known) **6:16-bk-06371-KSJ**  
 First Name Middle Name Last Name

## Identify the creditor and the property that is collateral

Creditor's name: **Santander Consumer USA**  
 Description of property: **2008 Ford F-150 (approx. 100000 miles)**  
 securing debt:

## What do you intend to do with the property that secures a debt?

- ☐ Surrender the property.  
☐ Retain the property and redeem it.  
☒ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

## Did you claim the property as exempt on Schedule C?

- ☐ No  
☐ Yes

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

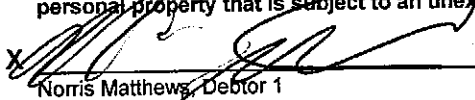
Describe your unexpired personal property leases

Will this lease be assumed?

None.

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X   
 Norris Matthews, Debtor 1

X \_\_\_\_\_  
 Signature of Debtor 2

Date 12/02/2016  
 MM / DD / YYYY

Date \_\_\_\_\_  
 MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<b>Norris</b>		<b>Matthews</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>MIDDLE DISTRICT OF FLORIDA</b>			
Case number (if known)	<b>6:16-bk-06371-KSJ</b>		

**Check one box only as directed in this form and in Form 122A-1Supp:**

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

**Official Form 122A-1****Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

**Part 1: Calculate Your Current Monthly Income**

1. What is your marital and filing status? Check one only.

- ☐ Not married. Fill out Column A, lines 2-11.
- ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- ☒ Married and your spouse is NOT filing with you. You and your spouse are:
- ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
- ☒ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you filed the bankruptcy case. 11 U.S.C. § 707(a). For example, if you are filing on September 15, the 6-month period would be from 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in only one column only. If you have nothing to report for any line, write \$0 in the space.

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
\$2,375.86	
\$0.00	
\$0.00	

Debtor 1 **Norris** **Matthews**  
 First Name Middle Name Last Name

Case number (if known) **6:16-bk-06371-KSJ**

Column A  
Debtor 1

Column B  
Debtor 2 or  
non-filing spouse

**5. Net income from operating a business, profession, or farm**

	Debtor 1	Debtor 2
Gross receipts (before all deductions)	<u>\$0.00</u>	<u>          </u>
Ordinary and necessary operating expenses	<u>\$0.00</u>	<u>          </u>
Net monthly income from a business, profession, or farm	<u>\$0.00</u>	<u>          </u>

Copy here → \$0.00

**6. Net income from rental and other real property**

	Debtor 1	Debtor 2
Gross receipts (before all deductions)	<u>\$0.00</u>	<u>          </u>
Ordinary and necessary operating expenses	<u>\$0.00</u>	<u>          </u>
Net monthly income from rental or other real property	<u>\$0.00</u>	<u>          </u>

Copy here → \$0.00

**7. Interest, dividends, and royalties**\$0.00**8. Unemployment compensation**\$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: .....↓

For you..... \$0.00

For your spouse.....           

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.\$0.00**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

\_\_\_\_\_  
 \_\_\_\_\_  
 Total amounts from separate pages, if any.

+            +           **11. Calculate your total current monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$2,375.86	+		=	\$2,375.86
------------	---	--	---	------------

Total current  
monthly income

Debtor 1

**Norris**

First Name

**Matthews**

Last Name

Case number (if known) **6:16-bk-06371-KSJ****Part 2: Determine Whether the Means Test Applies to You****12. Calculate your current monthly income for the year. Follow these steps:**12a. Copy your total current monthly income from line 11.....Copy line 11 here → 12a. **\$2,375.86**

Multiply by 12 (the number of months in a year).

X 12

12b. The result is your annual income for this part of the form. 12b. **\$28,510.32****13. Calculate the median family income that applies to you. Follow these steps:**

Fill in the state in which you live.

**Florida**

Fill in the number of people in your household.

**1**Fill in the median family income for your state and size of household..... 13. **\$44,021.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X   
Norris Matthews, Debtor 1X \_\_\_\_\_  
Signature of Debtor 2Date **12/02/2016**

MM / DD / YYYY

Date \_\_\_\_\_

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.